

# Holistic Medicine: Advances and Shortcomings

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*Holistic medicine is an attitudinal approach to health care rather than a particular set of techniques. It addresses the psychological, familial, societal, ethical and spiritual as well as biological dimensions of health and illness. The holistic approach emphasizes the uniqueness of each patient, the mutuality of the doctor-patient relationship, each person's responsibility for his or her own health care and society's responsibility for the promotion of health.*

*As holism has become an increasingly popular concept, it has been distorted by both proponents and critics. Tendencies to equate holism with particular therapeutic modalities, to neglect public health for a one-sided emphasis on individual responsibility and to reject rather than elaborate on the scientific method have hampered the movement's progress. In the future orthodox and alternative approaches and techniques must all be seen as complementary parts of a larger synthesis that will genuinely deserve the name of holism.*

IN THE PAST DECADE, holistic medicine has rapidly emerged as a visible and controversial force in American medicine. The American Holistic Medical Association, founded three years ago, now claims some 500 physician members and has established a working alliance with the American Medical Students Association. Approximately 150 holistic health centers<sup>1</sup> have opened in all parts of the country and each month workshops and conferences on the holistic approach to health care draw thousands of physicians, other health care professionals and consumers. Several dozen medical schools offer electives in holistic and "alternative" medicine, and each semester faculty interest and student demand are generating others.

Holistic medicine has often been misunderstood

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and caricatured by its medical critics. Though statements by some of its advocates may make it appear so, holistic medicine is not merely a collection of obscure and unproved modalities and ancient truisms,<sup>2</sup> nor is it simply a derivative of "eclectically oriented psychotherapies."<sup>3</sup> Holistic medicine is not an anti-intellectual attempt to purge health care of qualified physicians or accepted biomedical therapeutics,<sup>4</sup> to deny the social and economic antecedents of illness<sup>5</sup> or to blame those who are sick for their own misfortune.<sup>6</sup> Holistic medicine may, in fact, be an important force in a broader effort to create a contemporary synthesis, one potentially richer than the biomedical and empiric traditions of which it is compounded.

It seems appropriate, as holistic medicine gains greater currency and as the conflicts it generates escalate, to offer a brief and, it is hoped, demystifying summary of its salient characteristics, to

highlight the attitudes and practices that inhibit its fruitful elaboration and to provide the foundation for a bridge to mainstream medical theory and practice.

Holistic medicine derives its name from biologist-philosopher Jan Christian Smuts's 1926 book *Holism and Evolution*.<sup>7</sup> To Smuts, holism (from the Greek *holos*) was an antidote to the analytic reductionism of contemporary science. It was a way of comprehending whole organisms and systems as entities greater than and different from the sum of their parts. Though it has sometimes been contrasted with them, holistic medicine includes *humanistic medicine* (which emphasizes the relationship between and personal development of both physician and patient), *psychosomatic medicine* (which is concerned with the interdependence and mutual influence of psychological and physical factors) and *behavioral medicine* (which stresses the psychosocial causes and effects of illness). Rightly understood and practiced, it is a comprehensive approach, not a smorgasbord of techniques, a force for reconciliation rather than division.

Holism has, of course, always been integral to healing. Hippocrates and the tradition out of which modern biomedicine has grown emphasized the environmental causes and treatment of illness; the etiologic and therapeutic importance of psychological factors, nutrition and life-style; the interdependence of mind, body and spirit, and the need for harmony between an individual and his social milieu and natural environment.<sup>8,9</sup> Holism is now invoked (at times too stridently) to balance more recent, technologically influenced tendencies to equate health care with the pharmacologic and surgical treatment of specific disease entities. Too often those who champion technology in the service of medical progress ignore the shaping force of interpersonal, social and economic factors on health and disease, confusing, in Sir William Osler's words, "the patient with his illness."

The origins of holistic medicine in our present "crisis" in health care have been described in great detail elsewhere.<sup>10</sup> Suffice it to say that the concept of holistic medicine has arisen at a time when the burden of disease in the United States has shifted from acute to chronic illness and when rising costs and proliferating side effects are raising questions even about our successful treatments. We are in a scientific climate that challenges conventional pre-einsteinian categories of cause and effect, a cultural context in which the

fragmentation, dehumanization and enforced passivity of human services—and indeed of life itself—are of enormous professional and public concern.

### Characteristics of Holistic Medicine

*The cornerstone of holistic medicine is its insistence that each patient be understood and treated as a unique individual made up of body, mind and spirit and that any health care must also take into account a person's environment.*<sup>10</sup> Holism offers its adherents a basis for overcoming the fragmentation of specialization by recalling the responsibility for psychological, spiritual and social therapies from the specialists—in internal medicine, mental health, pastoral counseling and social welfare—to whom they have been parceled out and reuniting those responsibilities in each practitioner and in teams of health care workers. Practitioners should include a patient's family, community and cultural background in the field of diagnostic evaluation. They must explore and appreciate the minute particularity of the new world that each patient brings to them and become sensitive to the complex psychology and uncommon life of people with common illnesses.

A holistic perspective respects the ways family and culture shape pathophysiology and distinguishes between the anatomic lesions that constitute a disease state or diagnostic category and an individual's experience of illness.<sup>11</sup> This perspective leads to a recognition of culturally sanctioned views of illness and medical care and to the incorporation of indigenous healers where their services are appropriate. Such a perspective also provides a theoretic basis for including nuclear and extended families and communities in the treatment of conditions as varied as hypertension,<sup>12</sup> cancer,<sup>13</sup> chronic pain<sup>14</sup> and schizophrenia.<sup>15</sup>

Proponents of holistic medicine suggest that patients with identical diagnoses may require quite different approaches—that is, different forms of exercise and diet and of pharmacologic and psychotherapeutic intervention. For example, one depressed asthmatic adolescent may best be treated in a group that runs several miles a day, while another obtains greater benefit from a systems-oriented family therapy.<sup>16,17</sup> One may do well with dietary manipulation, while the other continues to require pharmacologic intervention.

This aspect of holism is largely unexceptionable. A number of contemporary theoreticians, including Engel<sup>18,19</sup> and Eisenberg,<sup>20</sup> have re-

peatedly and cogently argued for adopting a carefully individualized biopsychosocial model of illness and medical care, while other investigators, notably Frank<sup>21</sup> and Schmale,<sup>22</sup> have suggested that such quasi-religious patient attitudes as *faith*, *hope* and *despair* may be of considerable importance in the course and outcome of an illness.

At times, however, some who describe themselves as holistic have stretched the limits of medical credibility—and common sense—and violated the principles of holism by vigorously championing one aspect of the holistic approach at the expense of others or failing to integrate the services of the various practitioners in a holistic health program. Some have emphasized the importance of life-style, attitude and emotional factors at the expense of necessary pharmacologic or surgical interventions, while others have neglected the psychosocial aspects of health care in an effort to establish the efficacy of a particular and enthusiastically promoted somatic remedy.

Physicians who have disproportionately emphasized the spiritual aspect of the holistic approach are perhaps most vulnerable to these criticisms. The results of controlled laboratory studies of healers by Grad<sup>23</sup> and Smith<sup>24</sup> and investigations of the therapeutic efficacy of placebo<sup>25</sup> and faith<sup>26</sup> suggest that “nonmaterial” forces may produce biochemical changes in living organisms. But aside from anecdotal accounts of so-called miracle cures,<sup>27-29</sup> there is as yet no evidence for the efficacy of “psychic” healing and no justification for its evangelic promotion.

*Holistic medicine emphasizes the responsibility each person should assume for his or her health.* This emphasis reflects a shift in illness patterns from infectious to chronic stress-related diseases, recent insights into the influence of personal habits and life-style on the origin and outcome of these conditions and the conclusions of such widely read documents as *A New Perspective on the Health of Canadians*<sup>30</sup> and “Doing Better and Feeling Worse.”<sup>31</sup> This idea of personal responsibility owes much to nonmedical influences: the *human potential movement* with its focus on the therapeutic role of will and the relationship between improved health and self-actualization<sup>32</sup>; and the revival of the emersonian tradition of self-reliance in an American population that has come to feel itself overly dependent on large institutions and authoritative, if not authoritarian, practitioners.

Some of the technology for implementing self-

responsibility has been well developed and well studied. Standardized tests such as the Social Readjustment Rating Scale<sup>33</sup> and the Health Hazards Appraisal<sup>34</sup> have enabled some patients to see how their habits, attitudes and expectations—the way they live and work and think and feel—affect their physical and emotional health. Psychotherapeutic techniques, such as freudian *free association*, jungian *active imagination*, role playing, hypnosis and visualization are also used to help patients become more aware of the ways in which they may have translated psychological processes and interpersonal dynamics into physical symptoms.<sup>35</sup> Though these introspective approaches seem intuitively correct to psychologically minded physicians and patients, they have so far received no systematic confirmation.

Many of the therapeutic approaches that holistic practitioners use also shift the burden of responsibility from physician to patient. In this context, the physician's work is the mobilization of the patient's own capacity for self-regulation, the stimulation of what Hippocrates described as the *vis medicatrix naturae*, the healing force of nature. Inspired by animal experiments on autonomic regulation<sup>36</sup> and the example of Indian yogis,<sup>37</sup> and aided by contemporary instrumentation, they teach their patients to use biofeedback, autogenic training, meditation and self-hypnosis to control blood pressure, slow heart rate and intestinal motility, relieve migraine headaches and chronic pain and alter electroencephalographic patterns that are characteristic of seizure disorders.<sup>38</sup>

Though it is extremely difficult to tease out the specific pathways that mediate these varied approaches, there is little doubt that they increase the level of patient participation, promote a sense of mastery and augment the placebo effect. On occasion, however, these practices have produced side effects of their own. At times, patients' failures to mobilize their own healing forces have produced an attitude of therapeutic nihilism in impatient and arrogant practitioners. Moreover, without a balanced attention to the environmental causes and remedies of some illnesses, the doctrine of individual responsibility can indeed degenerate to “victim blaming.”

*Holistic medicine includes the promotion of health and the prevention of disease and emphasizes the role of education in the process.* Many holistic physicians place *well-being* on a continuum that ascends from clinical disease through

the state of complete physical, mental and social well-being, which the World Health Organization has described as health, to "super health."<sup>39</sup> The latter is a condition of extraordinary vigor, joy and creativity that some regard as the psychobiologic concomitant of self-actualization. This viewpoint encourages physicians to help those who are functioning well to make still greater use of their biopsychosocial potential, as well as to treat clinical illness.

Coupled with the emphasis on individual responsibility and catalyzed by consumer movements in health care, this perspective has contributed to a change in the physician-patient relationship. There is a growing emphasis on the partnership between physician and patient<sup>30</sup> and a corresponding metamorphosis in the physician's role from treater to teacher. Some physicians have supplemented their therapeutic interventions with classes for activated patients,<sup>40</sup> instruction in self-care<sup>41</sup> and group courses on topics like stress reduction, interpersonal relations and nutrition.<sup>42</sup> Many of these classes are conducted jointly by professionals and present and former patients.

At the level of individual care, this evolving perspective and these practices provide a link between medicine and public health. Organizationally, they have contributed to the development of health promotion and "wellness" centers within and outside of traditional health care settings.<sup>1</sup>

*Holistic practitioners use a variety of diagnostic and therapeutic measures that lie outside the canon of traditional Western medical practice.* Some of these approaches, particularly an expanded attention to the therapeutic and preventive use of nutrition and exercise, reflect the more general professional and public concern with the effects of life-style on health and illness. Here the difference between the holistic and the conventional approach is more a matter of degree and emphasis. Thus a holistic practitioner may be more likely to combine psychotherapy with aerobic exercise, rather than psychoactive drugs, in the treatment of neurotic depression and to investigate the possible influence of mild hypoglycemia, food allergy and caffeine sensitivity, as well as psychogenic factors, on the production of anxiety.

Holistic physicians have also explored the utility of measures that have been found in other cultures and at other times to be empirically useful. This has led to the use of such investigative techniques as iridology, auriculodiagnosis and Chinese pulse-diagnosis<sup>43-45</sup> and such therapeutic

modalities as acupuncture, herbalism, homeopathy, fasting and musculoskeletal manipulation singly or in combination with traditional Western allopathic practice. Though this diagnostic and therapeutic flexibility has produced a number of interesting anecdotal accounts,<sup>1,14,46</sup> treatment results have not been systematically investigated. Also, at times open-mindedness has degenerated to promiscuity and experimentalism hardened to dogma.

Some practitioners have freely used approaches—acupuncture is a good example—in which they are inexpert. Others, particularly those who have been impressed by anecdotal reports or initial successes, have eschewed the essence of the holistic approach and tried to fit their patients' ills to the procrustean bed of particular diagnostic or therapeutic approaches. A recent study<sup>47</sup> describing the failure of iridology as a diagnostic tool, though unreplicated, demonstrates the importance of scientific evaluation of each of these procedures and the possible dangers of using them in isolation from more conventional approaches.

*Holistic medicine emphasizes the potential therapeutic value of the setting in which health care takes place and of the psychosocial supports it makes available.* Even the most progressive hospital tends to overwhelm and intimidate, to erect a barrier between those who come for help and those who provide it and to encourage patients to assume and maintain a "sick role."<sup>48</sup> Recent accounts in the literature describe possible ways of mitigating some of the adverse medical and psychological consequences of institutional treatment by actively involving patients in their own care<sup>49</sup> and by providing warm and supportive helpers for those who are hospitalized.<sup>50</sup>

Holistic physicians have tended to advocate change in the locus of care as well as a refinement in care in conventional settings. They do not deny the utility of the hospital in acute life-threatening illness and in high-risk deliveries. They do maintain that birth and death, the treatment of chronic illness, checkups and counseling, which do not require high technology, should be removed from institutional settings. Those who seek help for illness should have the opportunity to participate actively in their own care, in the care of others and in the creation, with professionals, of new kinds of therapeutic settings.

In recent years the holistic perspective has helped to shape the development of centers for general health care,<sup>1,42</sup> treatment of chronic ill-

ness,<sup>51</sup> low-risk deliveries,<sup>52</sup> care of the dying<sup>53</sup> and therapy for psychotic illness.<sup>54</sup> Some of these centers are free standing, others occupy parts of such existing community institutions as churches or schools. Some are residential, others not. Many include home treatment and outreach services. All offer an opportunity for education, socializing and active participation of patients and their families in addition to care in health and illness.

Creating these alternative settings was clearly a necessary step in the development of a holistic approach and provides a locus for innovative practice and continuing delivery of service. But it has tended to limit holistic medical services to communities whose residents are both adventurous and wealthy enough to seek out approaches that are largely uncovered by health insurance. It has also helped to isolate holistic practitioners from more established medical institutions where their work could be informed, challenged and enriched. Efforts are currently under way to establish holistic medicine and "wellness" programs for a variety of socioeconomic groups and in the context of large medical centers.<sup>1</sup>

*An understanding of and a commitment to change those social and economic conditions that perpetuate ill health are an integral part of the holistic approach to medicine and are a necessary counterbalance to its emphasis on individual responsibility.* A holistic perspective cannot consider individuals in isolation from their social, economic and ecologic contexts. The treatment of a lead-intoxicated child with chelating agents is clearly doomed to failure unless the child's physical surroundings change; administration of vitamins is absurd in the face of poverty that continues to make proper nutrition impossible and inadequate in a society whose entertainment media daily encourage children to subsist on processed junk foods.

Many holistic practitioners address themselves to these issues through classes in self-help, sponsorship of mutual-help groups and public education programs and public advocacy in their communities. Others continue to restrict their field of attention to their individual patients. In their concern with actual or potential governmental and institutional interference, they have retreated from a commitment to change the social and institutional conditions that inevitably limit the effectiveness of their practice, to a privatism and parochialism that must inevitably be self-defeating.

*Holistic medicine is as concerned with chang-*

*ing the attitudes of the physicians who practice medicine as with broadening and enriching medical practice.* In much of the ancient world and in many contemporary aboriginal societies, the education of healers is at once technical and sacred.<sup>55,56</sup> Traditionally, a process designed to pare away psychological armor, anxiety, fears and arrogance has accompanied the accumulation of technical knowledge and enabled young practitioners to handle their status as healers with modesty and wisdom. The long hours, low pay, persistent challenges and intermittent abuse of internship and residency are a distant shadow of this kind of training. The personal analysis of a modern psychoanalyst is our closest contemporary analogue.

Though there are no formal schools for holistic health care professionals, many physicians have begun to seek out this kind of psychological refinement and nourishment—in continuing education programs sponsored by such newly formed groups as the American Holistic Medical Association and the Association for Holistic Health, in experiential seminars and retreats on humanistic medicine, in courses in medical ethics and in an ever-increasing variety of psychotherapeutic and meditative techniques. In these contexts some have grown more aware of the intrapsychic and interpersonal barriers that prevent them from providing effective and sensitive care. Many have learned to be less dogmatic with and more generous to their patients and to regard their consultations as an opportunity to learn about their own shortcomings as well as their patients' illnesses. Increasingly they are taking seriously the Hippocratic tradition and its insistence that medicine is a sacred trust as well as a profession.

## Conclusion

The holistic approach to medicine and health care is a synthesis of the ecologic sensitivity of ancient healing traditions and the precision of modern science. It uses not only techniques whose effectiveness is extensively documented but also those we are just beginning to explore. In addition it unites our contemporary concern with personal responsibility and spiritual and emotional growth and our urge to democratic cooperation and social and political activism.

As this approach continues to gain adherents, its theoretic perspectives must be carefully elaborated, methods evaluated and shortcomings addressed. A balance must be struck between open-

ness to the unconventional and regulation of unscrupulous practitioners who inevitably flourish at the fringe of medicine and capitalize on the despair of prospective patients. Carefully controlled and replicated studies should be undertaken to determine whether particular diagnostic and therapeutic techniques are effective. Perhaps new conceptual frameworks and new methodologies, which can accommodate variations in individualized treatment and the combined effects of a variety of treatments, will be needed.

At the same time, the holistic medical movement must address itself to its own blind spots, that is, the emphasis on individual responsibility at the expense of therapeutic effort and social concern, the tendency toward faddishness and uncritical embrace of the unconventional and the restriction of the holistic approach to those who can afford it.

It is certainly time to create model holistic programs in a variety of communities and in conventional medical settings, to assess whether a combination of health promotion and public education—of Western and alternative approaches—can meet people's health needs more effectively and less expensively than the present system. Finally, it is most important to understand that holistic medicine is not simply an alternative or the sum of its techniques, but an attitude and an approach that can enrich all aspects of health care.

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